Image# 11972207857 PAGE 1 / 14

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office Us	se Only	
1.	NAME OF COMMITTEE (in		YPE OR F	PRINT ▼		mple: If typing the lines.	ng, type	12FE4	M5		
Н	ICA INC. GOO	D GOVE	ERNME	NT FUN	D			1 1 1			I
_											
AD	DRESS (number and	d street)	РО ВОХ								
ř	Check if diffe	rent	ONE PAI	RK PLAZA							
ŀ	than previous reported. (AC		NASHVII	LLE				TN	37203		
2.	FEC IDENTIFICA	ATION NUM	MBER ▼		CITY ▲		S	STATE A		ZIP COI	DE 🛦
	C C0006723				3. IS THIS REPORT		NEW (N) OR		AMENDED (A)		
4.	TYPE OF REP (Choose One)	ORT	(b) Mon	ort	Feb 20 (M2)		May 20 (M5)		Aug 20 (M8)	×	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:		Due	On:	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15				Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
	Quarterly	Report (Q1)) (c)	12-Day	П	Primary (12F	P)	Gene	eral (12G)	П	Runoff (12R)
	July 15 Quarterly	Report (Q2))	PRE-Election Report for the		Convention ((12C)	Spec	cial (12S)		
	October Quarterly	15 Report (Q3))	rioport for a		Convention	(120)	Орос	Mai (120)		
	January			E	Election on	M M /	D D /	Y	Y	in the State of	
	July 31 M	Mid-Year Non-election	(d)	30-Day POST-Electi		General (300	G)	Rund	off (30R)		Special (30S)
		on Report		Report for the	ne:	M M /	D D /	Y = Y = Y	- Y	in the	
	L (TER)			E	Election on					State of	
5.	Covering Period	M M	/ D 01		011	through	10	31	/ Y Y 201	Y Y Y	
l ce	ertify that I have ex	amined this	Report a	nd to the be	est of my kno	wledge and	belief it is true	e, correct	and complet	e.	
	pe or Print Name of		David Ar					•	·		
								N	1 M / D	D /	Y Y Y Y Y
Sig	nature of Treasurer	David A	Anderson			[Electronicall	y Filed] D	ate 1	1 16		2011
NO	TE: Submission of fa	alse, erroneo	ous, or inco	omplete infor	mation may su	bject the per	son signing th	is Report	to the penaltic	es of 2 L	J.S.C. §437g.
	Office			-		· ·				FOR	
	Use Only									ev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

10 2011 10 2011 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 261397.91 January 1, 2011 (b) Cash on Hand at 96265.65 Beginning of Reporting Period..... 35682.38 4425.90 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 100691.55 297080.29 6(a) and 6(c) for Column B)..... 23804.05 220192.79 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 76887.50 76887.50 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
. Contributions (other than loans) From:	tributions (other than loans) From:						
(a) Individuals/Persons Other							
Than Political Committees							
(i) Itemized (use Schedule A)	3987.50	21520.00					
(ii) Unitemized	433.50	10442.00					
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	4421.00	31962.00					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees	0.00						
(such as PACs)	0.00	0.00					
(d) Total Contributions (add Lines							
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)▶	4421.00	31962.00					
. Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
_							
8. All Loans Received	0.00	0.00					
_							
. Loan Repayments Received	0.00	0.00					
Offsets To Operating Expenditures	7	7					
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)	0.00	129.00					
6. Refunds of Contributions Made							
to Federal Candidates and Other							
Political Committees	0.00	3500.00					
'. Other Federal Receipts	7						
(Dividends, Interest, etc.)	4.90	91.38					
s. Transfers from Non-Federal and Levin Funds	4.30	31.30					
(a) Non-Federal Account							
(from Schedule H3)	0.00	0.00					
(IIOIII Scriedule 113)	0.00	0.00					
#\\	0.00	0.00					
(b) Levin Funds (from Schedule H5)	0.00	0.00					
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
. Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))▶	4425.90	35682.38					
. Total Federal Receipts							
(subtract Line 18(c) from Line 19)▶	4425.90	35682.38					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: – (a) Allocated Federal/Non-Federal	10101 11110 1 01100	Calcindar Tear to Bute		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating		7		
Expenditures	179.66	2368.40		
(c) Total Operating Expenditures	179.66	2368.40		
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	179.00	2306.40		
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	22500.00	170350.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	7 7			
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
ř				
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
# N = # H	0.00	0.00		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
() =				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
(aud Lines 20(a), (b), and (c))	7			
Other Disbursements	1124.39	47474.39		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	23804.05	220192.79		
Tatal Fadaral Bishurasan da				
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	23804.05	220192.79		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4421.00	31962.00		
1. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4421.00	31962.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	179.66	2368.40		
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	129.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	179.66	2239.40		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	6	OF	14
(check only one)								
>	1 1a		11b		11c	12		
	13		14		15	16		17

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNME	NT FUND	
Full Name (Last, First, Middle Initial) Jelden Arcilla		Date of Receipt
Mailing Address 3775 Oakridge Circle		10 282011
City	State Zip Code	Transaction ID : SA11AI.24078
Weston	FL 33331	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	
University Hosp/Med Ctr	CNO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) 3. Doug Crabtree		Date of Receipt
Mailing Address 3100 Channing Way	10 28 2011	
City	State Zip Code	Transaction ID : SA11AI.24079
Idaho Falls	ID 83404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Eastern Idaho Reg. Med. Ctr.	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Strict (openity)		
Full Name (Last, First, Middle Initial) Julie Dircks		Date of Receipt
Mailing Address 2851 NW 88th Terr		10 28 2011
Coral Springs	State Zip Code FL 33065	Transaction ID : SA11AI.24076
Coral Springs	i L 33003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	
University Hosp/Med Ctr	CFO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	350.00	
SUBTOTAL of Receipts This Page (optional)		1700.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR LI	PAGE	7	OF	14			
ı	(check							
	X 11	a	11b		11c	12		
	13		14		15	16		17

or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNI	MENT FUND	
Full Name (Last, First, Middle Initial) Karen Hayes Mailing Address 312 Willow Lake Dr		Date of Receipt
City Leesburg	State Zip Code GA 31763	10 28 2011 Transaction ID : SA11AI.24064 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	87.50
Name of Employer Palmyra Med Ctr Receipt For:	Occupation CFO	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50	
Full Name (Last, First, Middle Initial) Ann Holt Mailing Address 7141 Crooked Tree Dr.		Date of Receipt
City Anchorage	State Zip Code AK 99507	Transaction ID : SA11AI.24071 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer Alaska Regional Hospital Receipt For: Primary General Other (specify) ▼	Occupation CEO Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Kristen Lindenboom-Watabe Mailing Address 511 SE 5th Ave 2021		Date of Receipt
City Ft. Lauderdale	State Zip Code FL 33301	10 28 2011 Transaction ID : SA11AI.24077 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer University Hosp Receipt For: Primary General	Occupation AVP Aggregate Year-to-Date ▼	
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional	350.00	737.50
	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR I	PAGE	8	OF	14			
(check	conly o						
X 1	1a	11b		11c	12		
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNMEN	IT FUND	
١.	Full Name (Last, First, Middle Initial) James (RMCA) Miller Mailing Address 2810 Ambassador Caffery Pkw	у	Date of Receipt
	City Lafayette	State Zip Code LA 70526	10 28 2011 Transaction ID : SA11AI.24067 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Regional Med Ctr Acadiana Receipt For:	Occupation CFO	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Sandee Moore Mailing Address 3100 Channing Way		Date of Receipt
	City Idaho Falls	State Zip Code ID 83404	Transaction ID : SA11Al.24080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Eastern Idaho Reg Receipt For: Primary Other (specify) ▼	Occupation COO Aggregate Year-to-Date ▼ 500.00	
 >.	Full Name (Last, First, Middle Initial) Kathleen Nelson		Date of Receipt
	Mailing Address 3100 Channing Way	2011	10 28 Y = Y = Y = Y
	City Idaho Falls	State Zip Code ID 83404	Transaction ID : SA11AI.24086 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00
	Eastern Idaho Regional Med Ctr Receipt For:	CNO Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
s	UBTOTAL of Receipts This Page (optional)		800.00
T	OTAL This Period (last page this line number o	nly)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	=	9	OF	14
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	X	11a		11b		11c		12		
		13		14		15		16	,	17

01 10	i commercial purposes, other than using the	name and address of any political committee to	SOUCH COMMUNICIES HOME SUCH COMMUNICE.
	AME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNMEN	IT FUND	
1. <u>V</u>	ull Name (Last, First, Middle Initial) William Mark Rader ailing Address 12622 NW 68th Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FI fe	earkland EC ID number of contributing deral political committee. The committee is a second contributing deral political committee. The committee is a second contributing deral d	State Zip Code FL 33076 C Occupation CEO Aggregate Year-to-Date ▼	Transaction ID : SA11AI.24075 Amount of Each Receipt this Period 750.00
3	Other (specify) ▼ ull Name (Last, First, Middle Initial) ailing Address	750.00	Date of Receipt
FI fe	EC ID number of contributing deral political committee.	State Zip Code C Occupation	Amount of Each Receipt this Period
R	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
С. М	ull Name (Last, First, Middle Initial) ailing Address	State Zip Code	Date of Receipt
fe	EC ID number of contributing deral political committee. ame of Employer	Occupation	Amount of Each Receipt this Period
R	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUE	BTOTAL of Receipts This Page (optional)	<u></u>	750.00
тот	TAL This Period (last page this line number o	nly)	3987.50

S ľ

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 10 OF 14									
ΙT	EMIZED DISBURSEMENTS	Use separate schedule(s)	s) ((checl	k only	-	_	_	_	_			
-		for each category of the Detailed Summary Page		X	21b	22		23		24 [25		26
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or	for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any politi	ucai cc	ııımıt	iee to	SUIICIT C	ontri	butions	s iro	ın sucn	commi	uee.	
$ \rangle$	HCA INC. GOOD GOVERNMENT	ELIND											
//	HCA INC. GOOD GOVERNMENT	LOND											
_	Full Name (Last, First, Middle Initial)												
Α.	· Suntrust Bank						of D	isburse	eme	nt			
	Mailing Address B.O. Boy 622227					10	- 1		D 21	/ Y	2011	Y	
	Mailing Address P.O. Box 622227					10					2011		
	City	State Zip Code				T		lion In		B21B.24	1064		
	Orlando	FL 32862-2227				ırar	isaci	tion ID	: 3	B21B.24	1001		
	Purpose of Disbursement			-		Δ		h	D:-	la a		Davia	
	Candidate Name		┨			Amou	nt or	Each	DIS	burseme	ent this	Perio	oa
	Canada Harro			ategor Type	'y/		_	45		(8)	17	9.66	
	Office Sought: House Disbursen	nent For:	1	.,,,,				-,		,			
	Senate	Primary General											
		Other (specify) ▼											
_	State: District:												
В.	Full Name (Last, First, Middle Initial)					Data	of D	isburse	omo	nt			
D.						M		isbuist			Y	V	
	Mailing Address					IM =	IVI /			/ 1	Y = Y	_	
	City	State Zip Code							_				
	Purpose of Disbursement		l										
						Amou	nt of	Each	Dis	burseme	ent this	Perio	od
	Candidate Name		Ca	ategor	v/		-	_		-	-	-	
				Type	,		_	7		- 7			_
	Office Sought: House Disbursen												
		Primary General											
	State: District:	Other (specify) ▼											
_	Full Name (Last, First, Middle Initial)												
C.	and the second second second					Date	of Di	isburse	eme	nt			
						М	M /	D	D	/ Y	YY	Υ	
	Mailing Address									L			
	City	State Zip Code											
	,	p 0000											
	Purpose of Disbursement			_	$\neg \Box$								
	andidate Name					Amou	nt of	Each	Dis	burseme	ent this	Perio	od
	Candidate Name		Ca	ategor Type	y/								\neg
	Office Sought: House Disbursen	nent For:	<u> </u>	iype				7		7			
		Primary General											
		Other (specify) ▼											
	State: District:												
							_	-			47	0.60	ī
٤	SUBTOTAL of Disbursements This Page (optional)				•			7		- 7	17	9.66	
-	OTAL This Paried (last page this line number and)				_						17	9.66	
1 '	'OTAL This Period (last page this line number only).		•••••					7		- 7			

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE 1	1 OF 14
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(check only	one)		¬ —	
			Summary Page	21b	22	X 23 28b		25 26 29 30b
_				27	28a			
Ar or	ny information copied from such Reports and Statem for commercial purposes, other than using the nam	nents may e and add	not be sold or us dress of any polition	ed by any perso al committee to	on for the solicit co	purpose of ntributions	soliciting cont from such com	ributions ımittee.
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,					
$ \rangle$	HCA INC. GOOD GOVERNMENT	FUND						
\angle		. 0.12						
	Full Name (Last, First, Middle Initial)				Data	(D'l		
Α.	BENNET FOR COLORADO					f Disbursen		
	Mailing Address PO BOX 3078				10	13		
	The second of th					تنا ا		
		State	Zip Code		Trans	action ID :	SB23.24052	
		СО	80201		ITalis	action ib .	3B23.24032	
	Purpose of Disbursement debt retirement				Amoun	t of Each [Disbursement th	nis Pariod
	Candidate Name			0.1	, anoun	t or East E	JIODUI GOITTOTTE TI	no i chod
	MICHAEL F BENNET			Category/ Type			1	000.00
	Office Sought: House Disbursen	nent For:	2010					
		Primary	General					
		Other (sp	ecify) 🔻					
_	State: CO District: 00							
В.	Full Name (Last, First, Middle Initial)	JODE 9		ree INIC	Date o	f Disbursen	nent	
٠.	· CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.				M = M	/ D		V
	Mailing Address P.O. Box 11091 SUITE 1000 JAMES BUILDING				10	24		
	•	State TN	Zip Code		Trans	action ID :	SB23.24049	
	Chattanooga Purpose of Disbursement	IIN	37401					
	fundraiser				Amoun	t of Each D	Disbursement th	nis Period
	Candidate Name			Category/				2500.00
	CHARLES J FLEISCHMANN			Type		-	2	2500.00
	Office Sought: House Disbursem							
		Primary Other (spe	General					
	State: TN District: 03	Other (spi	ecity) \blacktriangledown					
_	Full Name (Last, First, Middle Initial)							
C.	ERIC PAC				Date o	f Disbursen	nent	
					M M	/ D I	/ Y Y I	Y Y
	Mailing Address 209 Pennsylvania Avenue, SE					05	201	1
	City State Zip Code							
		DC	20003		Trans	action ID:	SB23.24047	
	Purpose of Disbursement							
	fund raiser				Amoun	t of Each [Disbursement th	nis Period
	Candidate Name			Category/			5	5000.00
	Office Sought: House Disbursen	ent For:		Туре				
		Primary	General					
		Other (sp						
_	State: District:		<u>. </u>					
Г	·							
8	SUBTOTAL of Disbursements This Page (optional)						8	500.00
L								
ΙŢ	OTAL This Period (last page this line number only).					-		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 12 OF 14
ITEMIZED DISBURSEMENTS	Use separate scheduler for each category of the	(s) (check only	one)
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	The and address of any po	miliour committee to	consist commissions from each commission.
HCA INC. GOOD GOVERNMENT	FLIND		
/ HOA INC. GOOD GOVERNIVENT	TOND		
Full Name (Last, First, Middle Initial)			
^{A.} MARSHA BLACKBURN FOR COI	NGRESS INC.		Date of Disbursement
Matter Address BOD 200405			M M / D D / Y Y Y Y
Mailing Address PO Box 682185			10 13 2011
City	State Zip Code		
Franklin	TN 37068		Transaction ID : SB23.24050
Purpose of Disbursement			
fund raiser			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
MARSHA MRS. BLACKBURN Office Sought: House Disburse		Туре	1000.00
Office Sought: House Disburse	ment For: 2012 Primary General		
President	Other (specify)		
State: TN District: 07	Cinci (opeciny)		
Full Name (Last, First, Middle Initial)			
B. Mitch McConnell for US Senate			Date of Disbursement
	M - M / D - D / Y - Y - Y - Y		
Mailing Address 361A Russell Senate Office Bldg.			10 17 2011
0.1			
City Washington	State Zip Code DC 20510		Transaction ID : SB23.24053
Purpose of Disbursement	20010		
fund raiser			Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
MITCH MCCONNELL		Type	1500.00
	ment For: 2014		
Senate President	Primary General		
State: KY District: 00	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. National Republican Congression	al Comm		Date of Disbursement
National Republican Congressions	M M / D D / Y Y Y Y		
Mailing Address PO Box 96221	10 13 2011		
City	State Zip Code DC 20077		Transaction ID : SB23.24051
Washington Purpose of Disbursement	DC 20077		
fundraiser	Amount of Each Disbursement this Period		
Candidate Name		Category/	
		Type	5000.00
	ment For:		, ,
Senate	Primary General		, ,
Senate President			, ,
Senate	Primary General		
Senate President State: District:	Primary General Other (specify) ▼		7500.00
Senate President	Primary General Other (specify) ▼		7500.00

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 13 OF 14						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)					
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30					
Any information copied from such Departs and City	ponte may not be cald as							
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
HCA INC. GOOD GOVERNMENT	FUND							
Full Name (Last, First, Middle Initial)		<u> </u>						
A. National Republican Congressiona	I Comm		Date of Disbursement					
			M = M / D = D / Y = Y = Y					
Mailing Address PO Box 96221			10 20 2011					
City	State Zip Code							
Washington	DC 20077		Transaction ID : SB23.24054					
Purpose of Disbursement fundraiser								
Candidate Name			Amount of Each Disbursement this Period					
Cardinato Harrio		Category/ Type	5000.00					
Office Sought: House Disbursen	nent For:	71. "						
	Primary General							
State: President District:	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
B. Roger Williams U.S. Congress Cor	nmittee		Date of Disbursement					
Mailing Address 2340 West Interestate 20 Suite 214	10 20 2011							
City S Arlington	State Zip Code TX 76017		Transaction ID: SB23.24055					
Purpose of Disbursement	70017							
campaign			Amount of Each Disbursement this Period					
Candidate Name		Category/	1500.00					
Roger Williams Office Sought:	nent For: 2012	Туре	4					
	Primary General							
	Other (specify) ▼							
State: TX District: 33								
Full Name (Last, First, Middle Initial) C.			Date of Disbursement					
.	M M / D D / Y Y Y Y							
Mailing Address			/ / / /					
Oib.	75. O. J.							
City	State Zip Code							
Purpose of Disbursement								
One Palata Name	Candidate Name							
Candidate Name		Category/						
Office Sought: House Disbursen	nent For:	Туре						
	Primary General							
President	Other (specify)							
Fresident	Other (specify)							
State: District:	Other (specify)							
State: District:	·		6500 00					
	·	······ >	6500.00					

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 14 OF 14							
MIZED DISPLIPSEMENTS Use separate schedule(s) (check		FOR LINE (check only	IE NOMBEN.						
I LIVIIZED DISBUNSEIVIEN IS	for each category of the	21b	22 23 24 25 26						
	Detailed Summary Page	27	28a 28b 28c X 29 30						
Any information copied from such Reports and Staten	nents may not be sold or us	ed by any perso	on for the purpose of soliciting contributions						
or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)									
HCA INC. GOOD GOVERNMENT	FUND								
Full Name (Last First Middle India)									
Full Name (Last, First, Middle Initial) Tim Locke			Date of Disbursement						
" TIIII LOCKE		M M / D D / Y Y Y Y							
Mailing Address 1401 K Street NW			10 20 2011						
12th Floor									
,	State Zip Code DC 20005		Transaction ID : SB29.24059						
Washington Purpose of Disbursement	DC 20005								
reimburse expenses for attending NRCC			Amount of Each Disbursement this Period						
Candidate Name		Category/							
		Type	1124.39						
Office Sought: House Disburser									
	Primary General								
State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
3.	Date of Disbursement								
		M = M / D = D / Y = Y = Y							
Mailing Address									
City	State Zip Code								
Purpose of Disbursement									
			Amount of Each Disbursement this Period						
Candidate Name		Category/							
		Туре							
Office Sought: House Disbursen									
Senate President	Primary General Other (specify)								
State: District:	Carlot (opcony)								
Full Name (Last, First, Middle Initial)									
.			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address									
City	State Zip Code								
O.C.	Zip Oode								
Purpose of Disbursement									
			Amount of Each Disbursement this Period						
Candidate Name		Category/							
Office Sought: House Disburser	nent For:	Туре							
	Primary General								
President	Other (specify)								
State: District:	· · · · · · · · · · · · · · · · · · ·								
'									
SUBTOTAL of Disbursements This Page (optional)			1124.39						
			4404.00						
TOTAL This Period (last page this line number only)			1124.39						